



# The Journal

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February 23, 2017

## Naval Dosimetry Center Opens New Facility



Photo by MC2 Hank Gettys



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PHOTOS BY MC2 HANK GETTYS

**Defense Health Agency Director Vice Adm. Raquel Bono speaks to a crowd assembled for the Naval Dosimetry Center's ribbon cutting ceremony Feb. 16. The center finished moving to this location in January in anticipation of Walter Reed National Military Medical Center's upcoming remodel.**

# Naval Dosimetry Opens New Temporary Location

**By Andrew Damstedt  
The Journal**

A new temporary building housing the Naval Dosimetry Center was praised at a ribbon cutting ceremony Feb. 16.

Building 84T will be the center's home until its new space in the upcoming Walter Reed National Military Medical Center (WRNMMC) remodel is completed.

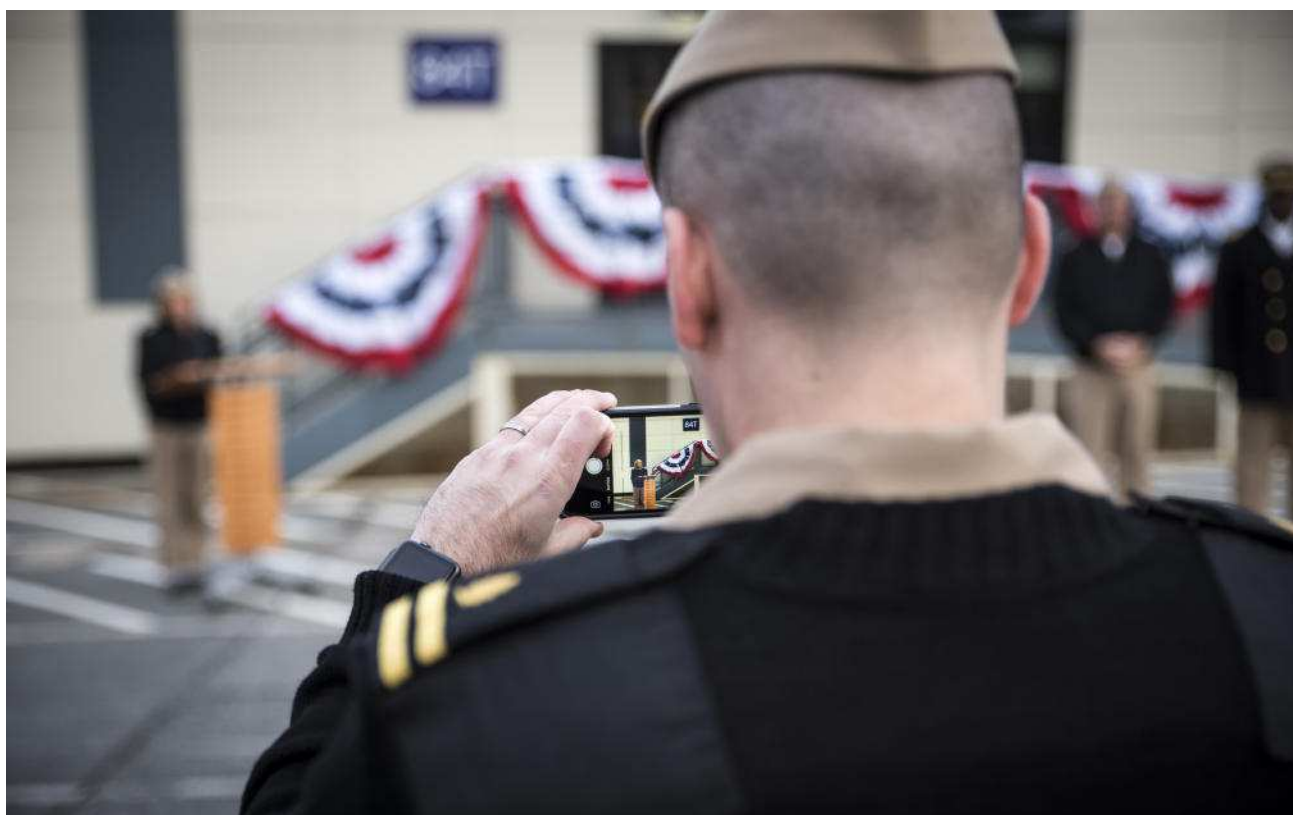
According to Lt. j.g. Kristina Jones, the ribbon cutting was ceremonial. Celebrating the opening recognized the completion of the physical move which took place mid-January.

The new building is host to 40 people who work at the center and provide centralized dosimetry services for the entire U.S. Navy and Marine Corps.

The center provides whole-body counting services, which measures radioactivity in the human body. The center also maintains the Navy's exposure registry, which has 3.9 million radiation exposures from 350 commands worldwide dating back to 1946, according to Jones. The center also monitors exposure trends, she said.

"The Naval Dosimetry Center was located just across the street...for more than 32 years," said Cmdr. Thad Sharp, officer-in-charge, Naval Dosimetry Center. "Today marks a milestone. Today, with the opening of our new high-quality temporary fix facility, our world class personnel along with the new equipment will continue to provide our Navy medicine, Marine Corps, industrial radiography, nuclear weapons and nuclear propulsion customers around the world, better products and services that they have come to expect from the Naval Dosimetry Center."

Defense Health Agency Director Vice Adm. Raquel Bono recognized the move as a significant step in improving the capability of a team that provides a



critical service. The remodel of the hospital is part of that forward progress, she observed.

"I'm excited that you are here now in this building, having visited your other place back on the fourth floor," she said. "And the fact that you at the time were turning out the level and the quality of work you did at that time was no surprise. It's just that now you deserve to have something that's just a little more state-of-the-art and a little more livable. I'm so glad that we're able to embark on this and get you into this new facility."

The center is the first clinic to move as part of the remodel, and will soon get new neighbors. Over the next year, more clinics and labs from WRNMMC will move into new temporary buildings scheduled to be built nearby.

Other attendees at the ceremony included Deputy Surgeon General of the Navy Rear Adm. Terry Moulton, Navy Marine Corps Public Health Center Commanding Officer Capt. Todd Wagner, NSAB Commanding Officer Capt. Marvin L. Jones, and John Hallworth, Naval Reactors.



# WRNMMC Program Tests Beneficiaries for Penicillin Allergy

By Bernard S. Little  
WRNMMC Public Affairs

“Are you allergic to any type of medication, such as penicillin?”

This is generally one of the first questions you are asked before receiving care from a health-care provider.

For approximately 10 percent of all U.S. patients, the answer is “yes” to having had an allergic reaction to a penicillin class antibiotic in their past, according to the Centers for Disease Control and Prevention (CDC). However, less than 1 percent of the whole population is truly allergic to penicillin, the CDC added.

“[In the military], this is also a readiness issue, as many active duty service members wear red dog tags indicating a likely non-existent penicillin allergy,” said Navy Lt. Cmdr. (Dr.) Taylor Banks, assistant service chief at Walter Reed National Military Medical Center for Allergy/Immunology/Immunizations. He is also clinic chief of WRNMMC Allergy/Immunology Clinic, and associate program director for the National Capital Consortium’s Allergy/Immunology Fellowship.

To better determine if service members and other Military Healthcare System beneficiaries are allergic to penicillin, Banks oversees WRNMMC’s Antibiotic Stewardship Program, which screens and tests individuals for penicillin allergy. He said approximately 95 percent of patients reporting penicillin allergy can be cleared, with many having outgrown the allergy.

“Providers and patients remain woefully under-informed about the availability of testing and how clearing patients is to the benefit [of the patient], as well as that of their providers and the health system generally,” Banks stated. “Penicillin allergy is associated with health-care costs of 9.5 times that of the testing itself,” he added.

“For the patient, it provides access to first-line agents which often have better side-effects profile and are better tolerated. For providers, it gives them access to the best practices which they can follow with the best recommendations [for treating] infections. For the health-care system, it provides enhanced antimicrobial stewardship,” Banks continued.

Discovered in 1928, penicillin is a group of antibiotics found to be effective against a number of bacterial infections caused by staphylococci and streptococci, such as pneumonia, erysipelas, strep throat, ear infections and more. Penicillin is also the base of other front-line drugs and when someone is allergic to it, he or she often has to take more expensive alternatives, which can produce increased side effects, thereby also increasing the chance for more hospital visits, Banks explained.

The WRNMMC’s Antibiotic Stewardship Program screens and tests beneficiaries “in a proactive fashion to optimize the availability of these often first-line, low-cost, low side-effect antibiotics to the 10 to 20 percent of patients labeled with an allergy,” said Banks.

Many people, such as Navy Lt. Preston Campbell, who Banks recently tested for penicillin allergy, are told they may have had an allergic reaction to penicillin, such as a rash or other side effects, at a young age. Most are unclear on the details of actually taking penicillin, Banks added.

Campbell explained he may have been about 10 years old when he experienced what he can recall as an allergic reaction to what may have been penicillin,



PHOTO BY BERNARD S. LITTLE

**Navy Lt. Cmdr. (Dr.) Taylor Banks, assistant service chief at Walter Reed National Military Medical Center for Allergy/Immunology/Immunizations, performs a physical on Navy Lt. Preston Campbell prior to testing him for a penicillin allergy. Banks said providers and patients are under-informed about the availability of testing for penicillin allergy, and how clearing patients is to the benefit [of the patient], as well as that of their providers and the health system generally.**

which required an overnight stay in the hospital. He recalled having a rash and being nauseated.

Because of the passage of time, and usually individuals being told at such a young age they may have a penicillin allergy, people not recalling specific details of a possible allergic reaction is “pretty typical,” said Banks.

Screening and testing for penicillin allergy at WRNMMC includes a patient history, physical and, when appropriate, a skin test and/or challenge dose. Banks said the testing is “very safe.” Testing can take from one to two hours, and patients should avoid antihistamines for the five to seven days prior to their appointment, he added.

“We currently use a self-referral for active duty patients presenting to the Medical Readiness clinic and the Brigade Medical Clinic at the Naval Academy. We are expanding our outreach with a pilot

program in cooperation with the Internal Medicine Medical Home Ports. Patients can also receive a referral through their provider for evaluation,” Banks said.

“Our dedicated penicillin clinic occurs weekly, but we also conduct testing and evaluation of patients who have referrals through our regularly scheduled clinic appointments,” he added.

“Our patients, providers, and the MHS at large will all benefit [from the Antibiotic Stewardship Program] by understanding the capabilities of rigorous penicillin allergy assessment and testing and the manifold benefits of clearing patients of these reported allergies. We know we can do it successfully,” Banks said.

For more information about the Antibiotic Stewardship Program, call Lt. Cmdr. Taylor Banks at 301-295-4511.



# Wounded Warriors Attend VP Dinner

By Andrew Damstedt  
The Journal

Capt. Karen Roddy-Spikes along with 20 other Wounded Warriors from the Warrior Transition Brigade attended a dinner honoring Vice President Mike Pence Jan. 18 at the Smithsonian’s American Art Museum. Roddy-Spikes said she was honored to attend the dinner and that she could feel the vice president’s sincerity when she met him.


“I shook his hand about three times and he took selfies with me,” Roddy-Spikes said. “He was doing the selfies himself because I wasn’t good at taking them.”

She said he went to everybody’s table and there were more than 300 people in attendance and by the end she noticed that Pence and his wife’s food was still at their table uneaten.

“That’s nice, that’s dedication,” she said.


PHOTOS COURTESY ARMY CAPT. KAREN RODDY-SPIKES





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## 2017 Military Saves Week



PHOTO BY ANDREW DAMSTEDT

Naval Support Activity Bethesda Commanding Officer Capt. Marvin L. Jones signs a proclamation declaring Feb. 27 to March 4 as 'Military Saves Week.' at the Navy Federal Credit Union inside the Navy Exchange. Holding the proclamation is Navy Federal Credit Union Regional Manager David Jones, left, and Branch Manager Ryan Flynn. Military Saves Week encourages services members and their families to set personal savings and debt reduction goals, make a simple savings plan and work on that plan throughout the year.

## Preventive Medicine Unit Hosts Outbreak Investigation Workshop during CP-17

### From Navy Environmental and Preventive Medicine Unit 2 Public Affairs

Sailors from Navy Environmental and Preventive Medicine Unit (NEPMU) 2 hosted an outbreak investigation workshop, Feb. 8, as part of Continuing Promise 2017's (CP-17) training for partner nation community health workers who may participate in investigations of infectious disease outbreaks.

The workshop was one of several public health knowledge exchanges hosted by NEPMU-2 Sailors currently deployed in support of CP-17.

"The recent Zika virus pandemic in Central and South America highlights the critical roles surveillance and outbreak investigations play in protecting the health of the public," said Lt. Cmdr. Lucas Johnson, officer in charge of CP-17's preventive medicine detachment.

The one-day workshop was attended by 36 health professionals from Puerto Barrios, Guatemala, and surrounding rural communities. Course content included a review of common types of infectious disease outbreaks, preparation and execution

outbreak investigations, establishing community disease surveillance programs, and principles of health risk communication.

The course culminated in a simulated outbreak investigation where participants translated their enhanced knowledge into best practices for maximizing the effectiveness and efficiency of conducting outbreak investigations in limited-resource settings.

"This workshop, and activities like it, are discrete opportunities to fundamentally strengthen the health care capacity of partner nations," said Johnson. "Participants from today's workshop are not only prepared to independently conduct an outbreak investigation themselves; they're prepared to teach other community health professionals their new skill set."

CP-17 is a U.S. Southern Command-sponsored and U.S. Naval Forces Southern Command/U.S. 4th Fleet-conducted deployment to conduct civil-military operations including humanitarian assistance, training engagements, and medical, dental, and veterinary support in an effort to show U.S. support and commitment to Central and South America.

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# TeamSTEPPS Seeks to Enhance Care, Team-Building

By MC1 Chris Krucke  
WRNMMC Public Affairs

Walter Reed Bethesda staff consistently seeks out new best practices to enhance the patient experience and deliver extraordinary patient care and for clinical departments across the medical center to build stronger and more reliant teams in the workplace. Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS) training is just one of many one ways, the medical center staff are working to meet those goals.

"The TeamSTEPPS principles are about providing extraordinary patient care," said Navy Lt. Cmdr. Ogwo Ogwo, service chief, 4 Center, Surgical Nursing Department. "The class teaches skills necessary to provide quality and safe patient care."

"The goal is to have all hospital personnel trained and using the TeamSTEPPS methodology. This would make our hospital safer for our patients," agreed Victor Mosley, TeamSTEPPS champion for Walter Reed National Military Medical Center and the National Capital Region, Medical Directorate. "As we are striving to become a High Reliability Organization (HRO), teamwork plays a pivotal role in this transformation."

According to the WRNMMC

TeamSTEPPS webpage, which link can be found on the intranet under the PROGRAMS tab, "TeamSTEPPS is an evidence-based teamwork system developed jointly by the Department of Defense (DoD) and the Agency for Healthcare Research and Quality (AHRQ) to improve institutional collaboration and communication relating to patient safety. It is designed to improve the quality, safety, and efficiency of health care by improving communications and other teamwork skills among health-care professionals."

"The course includes skills necessary to communicate effectively to fellow team members, leadership skills, skills necessary to be a supportive team member, and conflict resolution skills," Ogwo added.

The TeamSTEPPS gauges its success on testimony from evidence-based stories shared by organizations which have successfully implemented and sustained the initiative using the materials and tools discussed in the curriculum.

At a recent AHRQ TeamSTEPPS National Conference, civilian and Department of Defense staff members from various facilities presented some of their success stories. For example at the U.S. Naval Hospital Sigonella in Italy staff reported "decreased late operating room starts by 48 percent; team

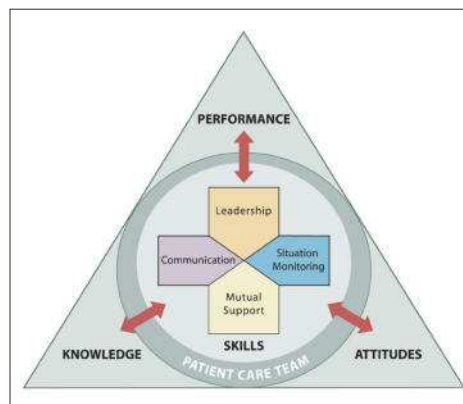


IMAGE FROM WWW.HEALTH.MIL

**Components of TeamSTEPPS includes leadership, communication, situation monitoring, mutual support, performance, attitude and knowledge.**

members freely shared information and communicated safety concerns; all staff stated they feel more empowered and their concerns were being taken seriously at all levels."

Ogwo explained the importance of TeamSTEPPS at WRB detailing how the Surgical Nursing Department uses TeamSTEPPS daily.

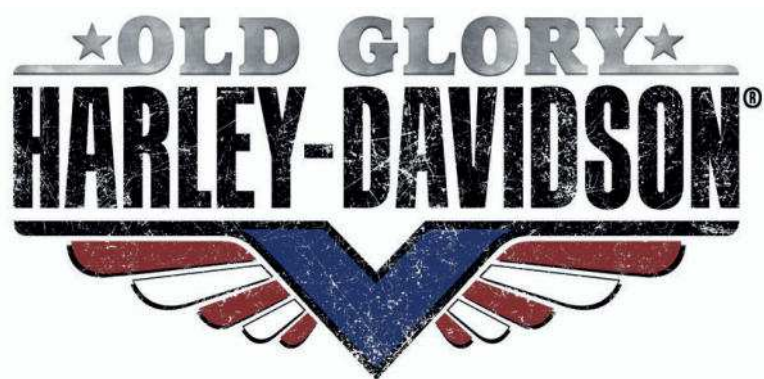
"We start the day with a safety muster. In attendance is the entire unit's staff. During this muster the previous shift goes through any difficulty they had. They also discuss the current census, restraints, [patient directives], any

patient requiring special care, expected admissions, possible discharge, patient having procedure for the day, administrative information, current and ongoing training and equipment issue. The team leader for each team will then communicate any information that is unique to their team. The team leader will also articulate the plan for the day. For all TeamSTEPPS huddle, pre-brief and debrief, every member of the team is given opportunity to voice any concern they may have," Ogwo explained.

TeamSTEPPS instructors lead the interactive team-building classes, which include the half-day Fundamentals course designed for all clinical personnel and individuals who come in contact with patients. The Train-the-Trainer course is a 16-hour TeamSTEPPS course designed to give participants skills and knowledge to help implement a TeamSTEPPS program in their work area, whether it is an inpatient, outpatient or administrative setting, according to Mosley.

There is also the Essentials course, available for all other personnel on an as-needed basis.

For more information or to sign up your department for training, contact the TeamSTEPPS Chief of Quality, Dr. Thomas Fitzpatrick at: 301-319-8455.



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# Darnall Resource Center More Than Your Typical Library

By Kalila Fleming  
WRNMMC Public Affairs

Where within Walter Reed Bethesda can you find 4,500 print books, 2,200 e-books and 10 web-accessibility computers to assist with patient care in a designated space?

If you guessed the Darnall Biomedical Learning Resource Center at Walter Reed National Military Medical Center — then you're correct.

Located in room 3458, on the third floor of the historic Tower (Building 1), the resource center, also called the medical library, houses a wealth of health-care knowledge and information.

Initially called the Darnall Dental Library, the center expanded its services and became the Darnall Biomedical Learning Resource Center in 2010. In 2015, the center was honored by the Federal Library and Information Network (FEDLINK) as its Small Library of the Year, a national award recognizing innovation in how the facility fulfilled the information needs of its customers.

According to the resource center's mission, it seeks to be a "forward-looking, innovative service valued by the WRNMMC staff as an integral component of quality health-care delivery."

Kimberly Adams, director of the resource center, stated "...[the Darnall] medical librarians go on rounds, assist with systematic reviews, help with research, and [assist with] data management, which is now required when [medical center staff members] submit grant applications."

Walter Reed Bethesda's vision of innovation is evident in the work that is conducted in collaboration with clinical librarians and medical providers, Adams added.

Army Lt. Col. (Dr.) Agnes Sierocka, chief of neonatology at Walter Reed Bethesda said, "The clinical librarian service is a great help, especially for our fellows and residents. Sometimes the young trainees [find challenges] in figuring out how to search the medical literature and how to find the right articles, and [the medical librarians] offer a tremendous help."

Sarah Cantrell, clinical librarian in the Darnall center, echoed Sierocka's sentiments. "We support physicians and nurses as they provide medical care to patients. We are supporting them by providing evidence-based resources, articles, and the latest information — the research that comes out, that they can make their clinical decisions based on the evidence," she said.

Cantrell explained her duties as a clinical librarian, tagging it as a "hyper-specialized" medical librarian. "[Clinical librarians are] someone who attends rounds with a patient-care team in an effort to support evidence-based decision-making at the point of care to work with the team," Cantrell said.

She added, "...we are learning about the patient, about their condition, about their treatment options, the diagnoses that they may be tossing around, and [we] play an active role in that team to help them locate evidence, whether that is through journal articles, book chapters, or other factual up-to-date information in real time."

Cantrell said Darnall librarians host workshops for Walter Reed Bethesda staff and beneficiaries on how to use the resource center's services available. "We also have strong roles in graduate medical education, teaching residents and interns how to become savvy consumers of information," she said.

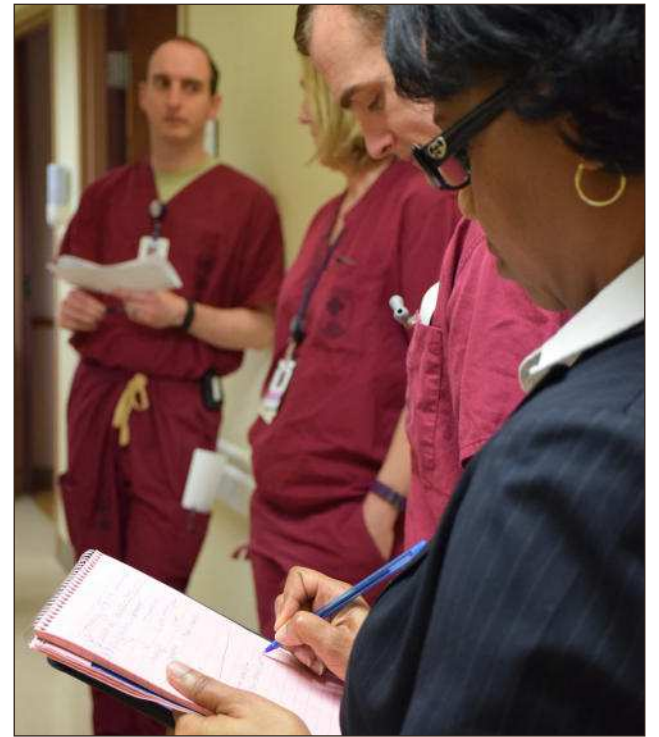


PHOTO BY KALILA FLEMING

**Darnall clinical librarian, Michele Mason-Coles (right) takes notes in preparation for conducting a medical search during rounds in the Neonatal Intensive Care Unit at Walter Reed National Military Medical Center on Feb. 14. Clinical librarians support physicians and nurses as they provide medical care to patients. Their goal is to provide evidence based resources and articles, so that they can make clinical decisions based on the evidence.**

Adams added, "We are always thinking of how to expand the services we offer, and to become more integrated into the health-care activities of the hospital. We are actively looking at ways to directly engage with patients."

Adams credits the command's support in allowing the library to be creative with their services and clinicians.

"I try to use and I hope that the positive response and feeling that we've garnered here [at WRNMMC] will reflect or impact other facilities in some way," Adams said.

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# Swift Action by Frank Cable Sailor Saves Child's Life

By MC2 Allen Michael McNair  
USS Frank Cable (AS 40) Public Affairs

From the moment he noticed a family in distress, to the moment an unconscious child lay on the floor in front of him, time did not exist. Inside a floral shop in Haganta, Guam, the sounds of crying and incomprehensible speech filled the room.

Though they could not understand English, he used gestures to assure the family he could help. He examined the child's body; no signs of breathing. He placed two fingers on his neck; no pulse. With his palms sweating and his heart pounding, he got down on the floor. He leaned in, gave two short breaths of air, and then began chest compressions.

Machinist's Mate (Auxiliary) 2nd Class Chase Slicer, assigned to submarine tender USS Frank Cable (AS 40) and native of Vacaville, California, used his Navy training to save the life of a child he didn't know.

"There was no second guessing in my mind that if the baby needed help, I would be the one to do it," said Slicer. "As far as I knew, I was the most qualified in the room."

Slicer was in his car at a red light at approximately 4 p.m. Dec. 12, 2016, and saw a family behaving frantically as they carried a child into a floral shop. Slicer's intuition told him something was wrong, so instead of continuing on through the stop light, he made a U-turn and went to investigate.

He walked into the shop and the employees told him the child was not responsive and they asked if he could help.

"Going into the room in uniform, people instantly look to you as a figurehead," said Slicer.

About 30 seconds after beginning chest compressions, the child's eyes began to open. Slicer

placed two fingers on the child's neck and was relieved to feel a steady, beating pulse. Moments later, a Guam police officer appeared on the scene. Shortly after, paramedics appeared. Slicer informed them of his actions and they took over from there.

"You think you're ready for something like that, but when it actually happens, you revert back to your training," said Slicer. "It felt really good knowing that I had the potential of changing someone's life forever."

Capt. Drew St. John, Frank Cable's commanding officer, said he was glad to know Slicer did not hesitate to react when he saw someone who needed help.

"Petty Officer Slicer is a great example of the professional Sailors who crew the Frank Cable," said St. John. "I have no doubt that each and every one of them would have reacted in much the same way."

Slicer said he hopes his actions can be an example for his shipmates and other Sailors in the fleet.

"It's as simple as stopping to help change a flat tire," said Slicer. "We may think that's a simple task, but for some people, it's not. You don't know that if you keep driving someone else will come along."

On Friday, Jan. 28, Capt. St. John awarded Slicer with a Navy and Marine Corps Commendation Medal for his bravery and swift action.

"I've always tried to be a good citizen; if people need help, I always stop," Slicer said. "I don't help people for the award. I appreciate the award but I did it because it's who I am."

As Slicer took the stage to receive his award, he received a standing ovation from a crowd full of his shipmates. Though he appreciated the response from the crowd, it didn't compare to what he received as he left the scene that December night.

"The Japanese have several ways of bowing," said Slicer. "Each degree of bow represents something



PHOTO BY MC2 ALLEN MICHAEL MCNAIR

**Machinist's Mate Auxiliary 2nd Class Chase Slicer, a Sailor assigned to the submarine tender USS Frank Cable (AS 40), poses for a portrait on the ship's flight deck, Feb. 14. Slicer was awarded the Navy and Marine Corps Commendation medal for taking swift action and successfully resuscitating an unconscious child.**

different. When the grandfather came up to me and gave me a formal bow, even though he couldn't communicate, it signified to me that I did the right thing."

Frank Cable is forward deployed to the island of Guam and conducts maintenance and support of submarines and surface vessels in the 5th and 7th Fleet areas of operations.

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# Carderock's MAKE Lab Hosts Marine Corps Innovation Challenge Winners

By Daniel Daglis  
Naval Surface Warfare Center  
Carderock Division Public Affairs

Sometimes the best ideas come from within. At least this is the concept behind the Marine Corps Innovation Challenge, which empowers Marines and Sailors to come up with fresh ideas to increase safety and efficiency for their unit or mission.

Three of the winners of this past year's challenge have been given the opportunity to visit Naval Surface Warfare Center, Carderock Division in West Bethesda,

Maryland, to work alongside Carderock scientists and engineers in the Manufacturing Knowledge and Education (MAKE) Lab. Using their time in the lab, Innovation Challenge winners are able to prototype their ideas using the MAKE Lab's 3-D printers and additional resources. Carderock's Additive Manufacturing Project Office, along with the Corrosion and Coatings Engineering Branch, have partnered to provide support for the competition.

With this support, the winners will move forward with field testing at their respective units and finally

present their innovations to senior leaders with the goal of implementing their solutions across the Marine Corps.

2nd Lt. Ben Lacount, currently stationed at the Marine Corps Air Ground Command Center in California, was the first winner to visit the MAKE Lab to prototype his idea for an expended rounds counter in December. The counter is a device designed to be attached to the Picatinny rail, specifically for the M16 rifle.

"You're supposed to keep track mentally of how many shots you have taken, but if you're in a firefight that might not be one of your priorities," Lacount said. "Having a counter there to display instantly and accurately to provide you with that number can be of great benefit for the operator."

Lacount worked with Bryan Kessel, an engineer from Carderock's Additive Manufacturing Project Office, to create the inertial mass design.

"Bryan designed it for the left side, which is great because on the left side there's not really anything to worry about other than the firearm's magazine ejector," Lacount said. "We have it on a low profile so that it should be able to fit underneath the scope or anything on the top of the Picatinny rail. There's nothing the operator should be focused on [the] left side of the weapon. Even if you're left-handed and you'll be focusing more on the right side of the weapon, you can adapt the counter because — using the Picatinny rail system — we can add a swivel and allow the counter to adapt to either side. It is the same concept with scopes, which is based on user preference."

Lacount said the counter is designed to react to the recoil of the rifle upon being fired, giving the operator an accurate 1-1 ratio no matter what direction the weapon is fired.

Innovating firearms is not the only concept which benefits the warfighter. Staff Sgt. Daniel Diep visited Carderock's MAKE Lab Jan. 23-Feb. 10 to work on a prototype of a rather practical device — a cable cap.

"We have a piece of artillery known as the M777 Howitzer, and it has a component on it called the Chief of Section Display (CSD) used for aiming navigation," Diep said. "There's a cable on there that runs from the M777 to the CSD, and this cable tends to get damaged a lot because the cap is not properly replaced. The way the cap is designed, it's a female head encased around a male head, so there's pins inside of this female head and when it gets dropped to the deck it will collect sand and debris. When you try to put the cap back on it'll get pancaked, the pins will get damaged, or they'll take the cable itself and stick it in the CSD and it'll get damaged that way, as well."

Diep, who is currently working on a master's degree in computer engineering from the University of Maryland, said he has tried to repair the cables in the past, but it is a daunting task which requires a week of work per cable. According to Diep, the cables are usually thrown out because it is not cost effective to repair them. Diep estimated it costs the Marine Corps \$3,000 per cable. The newly designed cap to protect the cables would cost about \$10, which would greatly remedy the financial burden.

"Ultimately we're trying to maximize the Marine Corps' dollars. The less money we have to use on parts for cables and things like that, we can use it on other things like gear and food and something that actually benefits the warfighter," Diep said.

The third winner of the challenge, Capt. Kyle McCarley, will be visiting Carderock in May to work on a prototype for a modification to field backpacks; enabling the warfighter to easily carry Bangalore, explosive charges used by combat engineers to clear obstacles in the field.



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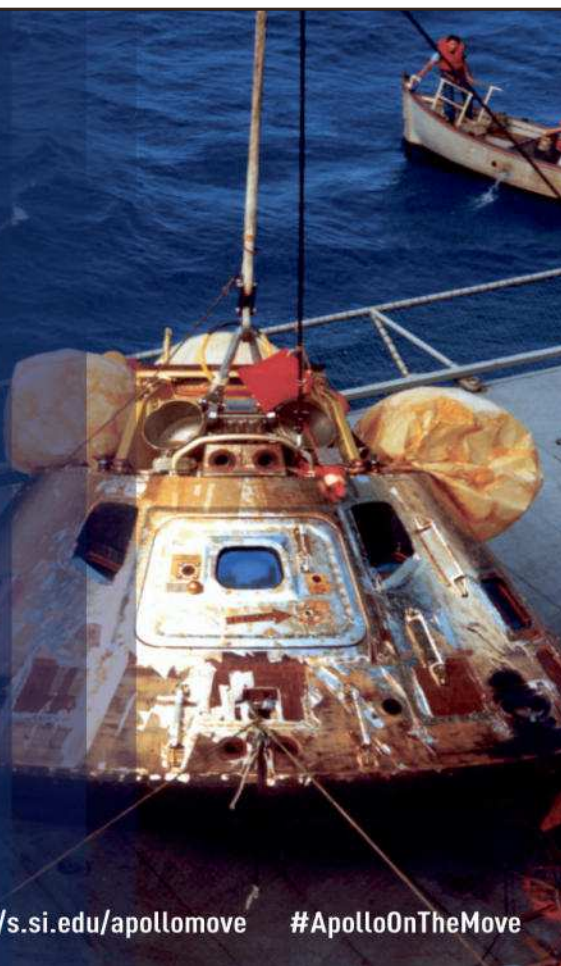


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# These intrepid African-American Soldiers broke barriers, paved the way



PHOTO COURTESY NATIONAL ARCHIVES

The 369th Infantry Regiment served on the front lines for 191 days during World War I, longer than any other American unit. In that time, the Soldiers of the regiment, known as the "Harlem Hellfighters," never gave up any ground they captured.

By Carrie McLeroy (compiled)  
www.army.mil

Throughout the nation's history, African-Americans have served in uniform with honor and distinction during times of war and peace. As a result of their sacrifices and intrepid spirits, today's highly capable and mission-ready Army leverages the strength of a diverse, all-volunteer force that includes more than 103,000 African-American Soldiers.

In recognition of African-American History Month, here's a look back at those brave Soldiers who broke barriers, saved lives, and paved the way for today's force.

## JAMES ARMISTEAD LAFAYETTE

Born into slavery, Lafayette served on behalf of the Continental Army during the Revolutionary War as a double agent. The trust he earned from British Gen. Charles Cornwallis and Benedict Arnold allowed him to gain access and pass information that would lead to an

American victory at the Battle of Yorktown. Despite his bravery in service, as a slave-spy he wasn't eligible for emancipation under the Act of 1783 for slave-Soldiers. However, with the help of the Marquis de Lafayette, who was his commander during the war, he petitioned for his freedom, which was granted in 1787.

## SGT. WILLIAM CARNEY

After being shot in the thigh during the assault on Fort Wagner, South Carolina, July 18, 1863, Sgt. Carney crawled uphill on his knees bearing the Union flag, inspiring his fellow Soldiers to follow and never allowing the flag to touch the ground. Although severely wounded, Carney would survive the war and finally receive the Medal of Honor, May 23, 1900. While he wasn't the first African-American to receive the medal (Robert Blake, a Sailor, was presented the medal in 1864), his actions

See **SOLDIERS**

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# SOLDIERS

From  
Page 12

were the earliest to merit the nation's highest military medal for valor.

By the end of the Civil War, about 180,000 African-American men had served in the U.S. Army — 10 percent of the total Union fighting force. About 90,000 of them were former slaves from the Confederate states. Forty thousand African-American Soldiers died in the war: 10,000 in battle and 30,000 from illness or infection.

## CATHAY WILLIAMS

Williams was the first African-American woman to enlist in the U.S. Army, and the only one documented to serve posing as a man. She enlisted under the pseudonym William Cathay in 1866 and was given a medical discharge in 1868.

## COL. CHARLES YOUNG

Col. Young was the third African-American to graduate and receive a commission as a second lieutenant from the U.S. Military Academy at West Point in 1889. He was the last to do so until Benjamin O. Davis Jr. in 1936, and the first to advance to the rank of colonel in the regular Army. In addition to assignments with the 9th and 10th Cavalry as a platoon leader and troop commander, Young commanded an all-black squadron of



PHOTO COURTESY U.S. ARMY

**Tank crews from the 761st Tank Battalion await orders to clean out scattered Nazi machine gun nests in Coburg, Germany, April 25, 1945. The 761st Tank Battalion was the first African-American tank battalion to go into battle, and spent 183 continuous days in combat. The unit earned four campaign medals, 11 Silver Stars, 69 Bronze Stars and about 300 Purple Hearts. A Medal of Honor and a Presidential Unit Citation came later.**

volunteer cavalry during the Spanish-American War, and 2nd Squadron of the 10th U.S. Cavalry during the Mexican Expedition of 1916-17. After his promotion to colonel, he commanded Camp Grant, where he supervised the training of African-American recruits during World War I. In the course of his distinguished

career, he also served as a park superintendent when the Army administered national parks, a professor of military science at Wilberforce University in Ohio, and a military attaché at different times to Haiti, and twice to Liberia. He passed away of natural causes at Legos, Nigeria, in 1923. After his remains

were repatriated to the United States, he was buried with full military honors at Arlington National Cemetery.

## THE HARLEM HELLFIGHTERS

The 369th Infantry Regiment, "The Harlem Hellfighters," was the first African-American regiment to serve with the American Expeditionary Forces during World War I. The regiment served on the front lines for 191 days, longer than any other American unit in the war, and was the first unit to cross the Rhine into Germany. In all that time, the unit never lost a prisoner or gave up any ground it captured.

## BENJAMIN O. DAVIS JR.

While many know that Benjamin O. Davis Sr. became the first African-American general officer in the U.S. military in 1940, his family's military legacy didn't end with him. His son, famed Tuskegee Airman Benjamin O. Davis Jr., was the fourth African-American to graduate from West Point and the first to attain general officer rank in the U.S. Air Force.

## FREDDIE STOWERS, HENRY JOHNSON

As a result of racial discrimination, not a single African-American Soldier was awarded the Medal of Honor during World War I or World War II. It wasn't until 1991 that Stowers would be posthumously awarded the medal — 73 years after he was killed in action while leading an assault



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on German trenches in World War I. In 2015, Johnson would receive the Medal of Honor, 85 years after his death, for his heroic actions fighting against a German raiding party during that same war.

#### VERNON BAKER

In 1993, after an exhaustive review of records, seven African-Americans would receive Medals of Honor for their actions during World War II. Baker was the only living recipient, as the six other Soldiers were killed in action or died in the more than 50 years since the war ended.

#### THE 761ST TANK BATTALION

During World War II, the 761st Tank Battalion became the first African-American tank unit to go into battle. Its Soldiers would earn 11 Silver Stars, 69 Bronze Stars, about 300 Purple Hearts and, eventually, a Medal of Honor.

#### THE 555TH

#### PARACHUTE INFANTRY

Not only were the members of the 555th Parachute Infantry the U.S. Army's first African-American paratroopers, they were some of the nation's first airborne firefighters. The Soldiers were detailed to the U.S. Forest Service in 1945 as part of Operation Firefly, which was a joint military-civilian effort to combat wildfire threats from Japanese incendiary bombs that landed from Canada to Mexico and as far east as Idaho. During Operation Firefly, the 555th had 36 fire missions, which included 1,200 individual jumps.



U.S. ARMY PHOTO

**Brigadier Benjamin O. Davis Sr.** became the U.S. Army's first African-American general officer in 1940.

On July 26, 1948, President Harry Truman issued Executive Order 9981, which declared "that there shall be equality of treatment and opportunity for all persons in the armed services without regard to race, color, religion or national origin." This order would bring an end to racial segregation in the U.S. military.

**SGT. CORNELIUS CHARLTON,**  
**PFC. WILLIAM HENRY**  
**THOMPSON**

The Korean War was both the last armed conflict to see segregated units,



U.S. ARMY PHOTO

**Cpl. Alyce Dixon (right)** poses with other members of the 6888th Central Postal Directory Battalion during World War II. The only African-American Women's Army Corps unit to serve in Europe during World War II, the battalion was responsible for clearing a massive backlog of mail in first England and then France. Viewing their jobs as crucial to morale at the front, Soldiers processed some 65,000 pieces of mail per shift and worked three shifts a day. At the same time, they faced constant prejudice and broke gender and racial barriers.

and the first since the Revolutionary War to see African-American and white Soldiers fighting side-by-side in the same units. Only two African-American Soldiers would receive the Medal of Honor for action in the Korean War. Both Soldiers served with the 24th Infantry Regiment, one of the last remaining segregated regiments. Sgt. Cornelius Charlton and Pfc.

William Henry Thompson were both killed in action.

*Note: The information for this article was sourced from various documents provided by the U.S. National Archives, Army Historical Foundation, U.S. Army Center of Military History, The U.S. Vietnam War Commemoration and the U.S. Army Heritage and Education Center.*



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